



KANSAS CORPORATION COMMISSION 1061241
OIL & GAS CONSERVATION DIVISION

Form ACO-1

June 2009

Form Must Be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
- Gas D&A ENHR SIGW
- OG GSW Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic Other (Core, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

- Deepening Re-perf. Conv. to ENHR Conv. to SWD
- Conv. to GSW
- Plug Back: _____ Plug Back Total Depth _____
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

AFFIDAVIT

I am the affiant and I hereby certify that all requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Submitted Electronically

KCC Office Use ONLY

- Letter of Confidentiality Received
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____



1061241

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
_____ Perforate _____ Protect Casing _____ Plug Back TD _____ Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. _____ Producing Method:
 Flowing Pumping Gas Lift Other *(Explain)* _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____ <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Kenneth W. Cory, Ltd.
Well Name	Wiens 2-34
Doc ID	1061241

All Electric Logs Run

Micro-Resistivity Log
Gamma Ray/CCI/Cement Bond Log
Array Induction/Shallow Focused/Electric Log
Compact Photo Density/Compensated Neutron/Micro-Resistivity Log

KENNETH W. CORY, LTD.

6750 West Loop South, Suite 1050
Bellaire, Texas 77401-4198
713-661-5911 • Fax 713-661-2679

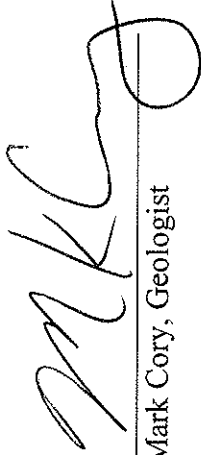
LETTER OF CONFIDENTIALITY

Kansas Corporation Commission
Conservation Division
130 S. Market – Room 2078
Wichita, Kansas 67202

Re: API: 119-21295-00-00
Wiens #2-34
S2 N2 SW NW
Sec 34-33S-28W
Meade County, Kansas

Kenneth W. Cory, Ltd. hereby requests that completions information and logs listed below be held confidential for a period of twelve (12) months:

Micro-Resistivity Log
Gamma Ray/CCL/Cement Bond Log
Array Induction/Shallow Focused/Electric Log
Compact Photo Density/Compensated Neutron/Micro-Resistivity Log



Mark Cory, Geologist

08-16-11
Date

Woda Services, Inc.

Conductor and Rat Hole Drilling, Landfill Gas Drilling and Well Construction Nationwide

Bill To
 Kenneth W Cory Ltd
 6750 W Loop South, Ste 1050
 Bellaire TX 77401-4198

INVOICE



Date	6/15/2011
INVOICE #	9112

Ordered By	Terms	Field Tkt	Legal Description	Lease Name	Drill Rig
Mark	Net 30	6523	Sec. 34-33S-28W	Weins 2-34	Duke #6

Item	Quantity	Description
Conductor	80	Drilled 80' of 32" hole for conductor
20" Pipe	80	Furnished 80' of 20" conductor pipe
Ream Hole		Ream Hole
60" X 5'	1	Furnished 5' X 5' tinhorn
Dirt Removal		Provided Labor and Equipment for dirt removal and cleanup
15"X 30'	1	Furnished 30' Shuck
15"X 20'	1	Furnished 20' Shuck
Placement		Equipment and Labor to place shucks in rat & mouse holes
Mud/Water		Freight/Trucking charge for mud/water
Welder		Welder
Grout		Furnished grout
Deliver Grout		Deliver grout to location
Mouse		Drilled rat & mouse hole
Cover Plate		Cover Plate
Permits		Permits

150008-3403

RECEIVED JUN 24 2011

1/3 201 = 4,715.16

2/3 105 = 4,430.32

Subtotal	\$13,775.00
Sales Tax (7.3%)	\$370.48

Thank you for your business.

Total	\$14,145.48
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P.O. Box 66 • Woodward, OK 73802-0066 • Phone: (580) 254-5019 • Fax: (580) 254-5908

KODD0001

15106302

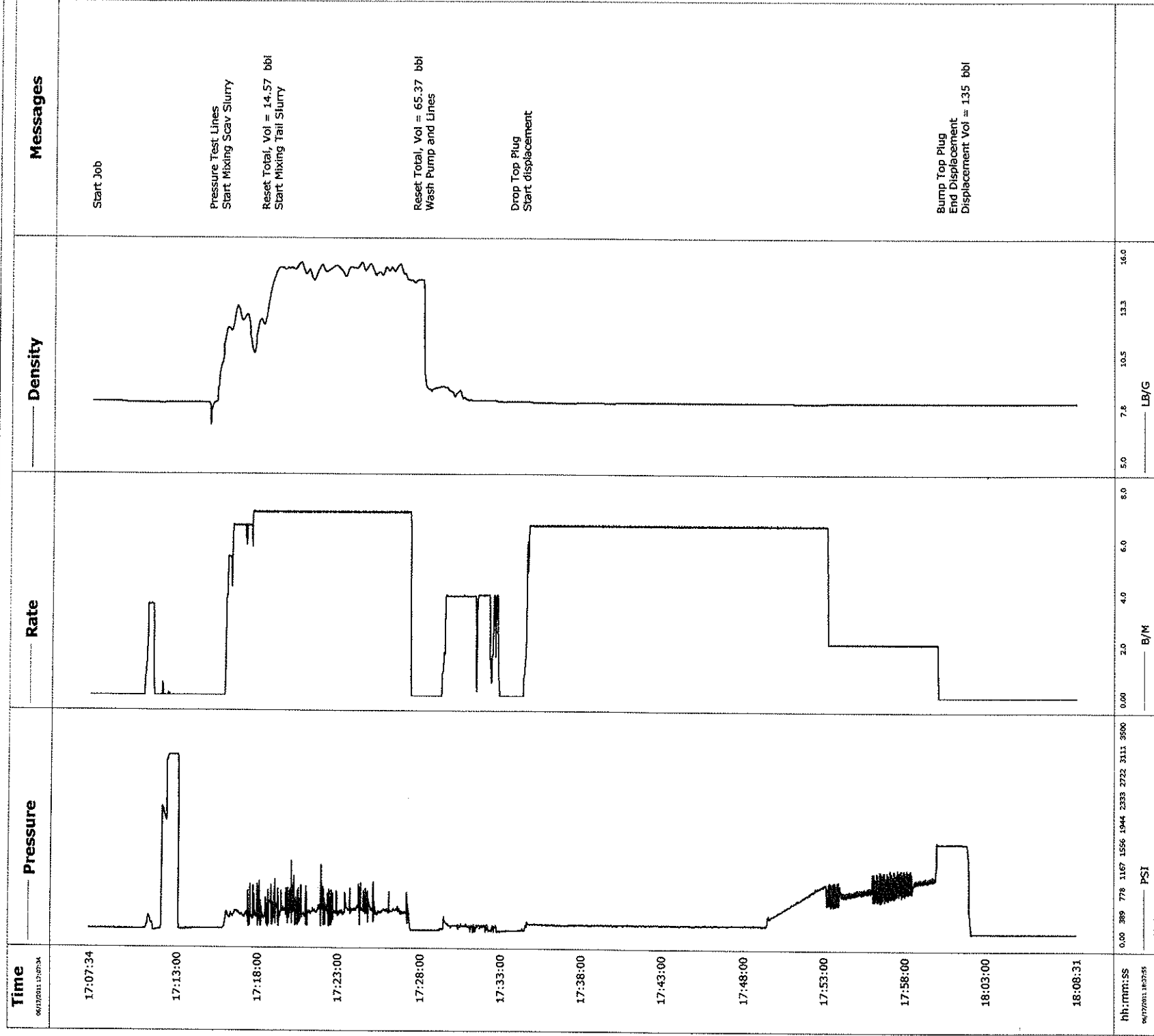
Well		Location (legal)		Customer		Job Number	
Wients 2-34		Meade, KS		Kenneth W. Cony LTD		570	
Field		Formation Name/Type		Schlumberger Location		Job Start	
Borcheres		Clean-Sandstone		El Reno-ROK		Jun/17/2011	
County		State/Province		Well MD		Well TVD	
Meade		Kansas		7.8 in		5742.0 ft	
Well Master		API/UWI		BHP		Pore Press. Gradient	
0631281554				BHST		lb/gal	
Rig Name		Service Via		BHCT			
Duke #6		Oil & Gas		117 degF		108 degF	
Offshore Zone		Well Class		Casing/Liner			
		Old		Weight, lb/ft		Grade	
Drilling Fluid Type		Max. Density		Size, in		Grade	
		lb/gal		5.5		15.5	
Service Line		Plastic Viscosity		0.0		0.0	
Cementing		CP		T/D		Depth, ft	
1570 psi				Size, in		Weight, lb/ft	
Service Instructions		Job Type		Grade		Thread	
		Cem Prod Casing					
		Max. Allowed Ann. Press		Perforations/Open Hole			
		psi		shot/ft		No. of Shots	
		Single Cement head		ft		ft	
				ft		Diameter	
				ft		in	
				Treat Down		Packer Type	
				Casing		Packer Depth	
				Displacement		ft	
				135.0 bbl			
				Tubing Vol.		Annular Vol.	
				bbl		bbl	
				136.7 bbl		Openhole Vol.	
						bbl	
Casing/Tubing Secured		<input type="checkbox"/> 1 Hole Vol. Circulated prior to Cement		Casing Tools		Squeeze Job	
Lift Pressure		740 psi		Shoe Type		Squeeze Type	
Pipe Rotated		<input type="checkbox"/> Pipe Recirculated		Guide			
No. Centralizers		10 Top Plug 1 Bottom Plugs		Shoe Depth		Tool Type	
Cement Head Type		Single		5742.0 ft		Tool Depth	
Job Scheduled For		Arrived on Location		Stage Tool Type		Trail Pipe Size	
Jun/17/2011 17:00		Jun/17/2011 15:30		0		ft	
Date		Time		Collar Type		Trail Pipe Depth	
24-hr Clock		Clock		Jun/17/2011 19:00		ft	
06/17/2011		17:07:34		Collar Depth		Seq. Total Vol.	
06/17/2011		17:07:39		ft		bbl	
06/17/2011		17:09:44		Density		Message	
06/17/2011		17:11:54		lb/g			
06/17/2011		17:14:04		Flow Rate			
06/17/2011		17:14:59		B/W			
06/17/2011		17:15:31		0.0		0.0	
06/17/2011		17:16:14		0.0		0.0	
06/17/2011		17:18:14		0.0		1.6	
06/17/2011		17:18:17		0.0		1.6	
06/17/2011		17:18:24		0.0		1.6	
06/17/2011		17:20:34		0.0		1.6	
06/17/2011		17:22:44		5.4		2.8	
06/17/2011		17:24:54		7.2		16.2	
06/17/2011		17:27:04		7.2		16.6	
06/17/2011		17:27:32		7.1		17.4	
06/17/2011		17:27:37		7.1		32.9	
06/17/2011		17:29:14		7.2		48.4	
06/17/2011		17:31:24		7.2		63.9	
06/17/2011		17:33:34		7.2		79.4	
06/17/2011		17:33:38		0.0		81.6	
				81.6		Reset Total, Vol = 65.37 bbl	
				81.6		Wash Pump and Lines	
				81.6			
				88.7			
				89.3			
				94.0			
				94.0		Drop Top Plug	

Well		Field		Borcheres		Job Start		Customer		Job Number	
Wilms 2-34						Jun/17/2011		Kenneth W Cory LTD		570	
Date	Time 24-hr clock	Treating Pressure PSI	Flow Rate S/M	Density LB/S	Volume BBL	Message					
06/17/2011	17:35:44	168	6.6	8.05	101.8						
06/17/2011	17:37:54	168	6.7	8.05	116.2						
06/17/2011	17:40:04	168	6.6	8.04	130.6						
06/17/2011	17:42:14	168	6.6	8.05	145.0						
06/17/2011	17:44:24	173	6.6	8.06	159.4						
06/17/2011	17:46:34	164	6.6	8.06	173.8						
06/17/2011	17:48:44	178	6.6	8.05	188.2						
06/17/2011	17:50:54	498	6.6	8.04	202.6						
06/17/2011	17:53:04	864	6.6	8.03	217.0						
06/17/2011	17:55:14	727	2.1	8.06	222.0						
06/17/2011	17:57:24	667	2.1	8.05	226.6						
06/17/2011	17:59:34	933	2.1	8.05	231.1						
06/17/2011	18:00:07	1574	0.0	8.05	232.1	Bump Top Plug					
06/17/2011	18:00:09	1569	0.0	8.05	232.1	End Displacement					
06/17/2011	18:00:19	1569	0.0	8.05	232.1	Displacement Vol = 135 bbl					
06/17/2011	18:01:44	1565	0.0	8.06	232.1						
06/17/2011	18:03:54	68	0.0	8.06	232.1						
06/17/2011	18:06:04	63	0.0	8.06	232.1						
06/17/2011	18:08:14	68	0.0	8.06	232.1						
06/17/2011	18:10:24	68	0.0	8.06	232.1						
06/17/2011	18:13:20	68	0.0	8.51	232.1	Mouse Hole/Rat Hole					
06/17/2011	18:14:44	114	1.0	15.70	232.9						
06/17/2011	18:16:54	114	1.0	15.20	235.1						
06/17/2011	18:19:04	68	0.0	15.27	236.4						
06/17/2011	18:21:14	123	0.9	15.18	236.4						
06/17/2011	18:23:24	100	1.4	16.18	239.3						
06/17/2011	18:25:34	118	1.4	16.00	242.2						
06/17/2011	18:27:44	118	1.4	16.00	245.1						
06/17/2011	18:29:54	63	0.0	15.52	247.6						
06/17/2011	18:32:04	68	0.0	9.69	247.6						
06/17/2011	18:34:14	173	3.9	9.02	250.4						

Post Job Summary

Average Pump Rates, bb/ min				Volume of Fluid Injected, bbl				
Slurry	N2	Mud	Maximum Rate	Total Slurry	Mud	Spacer	N2	
4.5			7.2	264.9	0.0	264.8		
Treating Pressure Summary, psi								
Maximum	Final	Average	Bump Plug to	Breakdown	Type	Volume	Density	
3020	-3750	282	1549			bbl	lb/gal	
Avg. N2 Percent	Designed Slurry Volume	Displacement	Mix Water Temp	Cement Circulated to Surface?	Washed Thru Perfs	Volume	bbl	
%	58.9 bbl	150.5 bbl	degF	<input type="checkbox"/>	<input type="checkbox"/>	To	ft	
Customer or Authorized Representative			Schlumberger Supervisor		Circulation Lost			<input checked="" type="checkbox"/> Job Completed
Mark Horney			Knia Taylor		-			

Well	Wiens 2-34	Client	Kenneth W Cory LTD
Field	Borcheres	SIR No.	670
Engineer	Knia Taylor	Job Type	Cem Prod Casing
Country	United States	Job Date	06-17-2011



ALLIED CEMENTING CO., LLC. 040216

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

Med Center

DATE <u>6-11-2011</u>	SEC <u>34</u>	TWP <u>33S</u>	RANGE <u>29W</u>	CALLED OUT <u>5:00 PM</u>	ON LOCATION <u>7:30 PM</u>	JOB START <u>4:00 PM</u>	JOB FINISH <u>5:00 PM</u>
LEASE # <u>W-105</u>	WELL # <u>2-34</u>	LOCATION <u>Med Center</u>		COUNTY <u>Wagoner</u>	STATE <u>KS</u>		
OLD OR (NEW) (Circle one)							

CONTRACTOR Duck #6 OWNER K.W. Corey

TYPE OF JOB Surface
 HOLE SIZE 12 1/4 TD 1518'
 CASING SIZE 8 7/8 DEPTH 1512'
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH

PRES. MAX DEPTH
 MEAS. LINE SHOE JOINT 43'
 CEMENT LEFT IN CSG.
 PERFS
 DISPLACEMENT 75 bbls of Freshwater

EQUIPMENT

PUMP TRUCK CEMENTER Dino F
 # 360-265 HELPER Jessen T
 BULK TRUCK
 # 421-252 DRIVER Don G
 BULK TRUCK
 # 336-252 DRIVER Dustin E

REMARKS:

Pipeless bottom hole cementing operation
 Pump 3 bags Freshwater, 1 bag 50%
 of Test Cement mix 1500 lbs of 10
 Cement - Spun down. Release plus
 50% displacement of water
 60 bbls, slow rate to 3:30 PM 9.5-50
 lbs, pump plus 9.5-55 bbls 500-1000
 PSI. Close down hole. Reasonable new
 cement, top off with 100%

CHARGE TO K.W. Corey
 STREET _____
 CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

DEPTH OF JOB 1512'
 PUMP TRUCK CHARGE _____
 EXTRA FOOTAGE _____
 MILEAGE _____
 MANIFOLD _____

TOTAL _____

To Allied Cementing Co., LLC.

You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any) _____

TOTAL CHARGES _____
 DISCOUNT _____ IF PAID IN 30 DAYS _____

PRINTED NAME X _____

SIGNATURE K.W. Corey
Thank you!!!

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Mark Sievers, Chairman
Ward Loyd, Commissioner
Thomas E. Wright, Commissioner

Sam Brownback, Governor

August 16, 2011

Mark Cory
Kenneth W. Cory, Ltd.
6750 W. LOOP SOUTH, STE 1050
BELLAIRE, TX 77401-4198

Re: ACO1
API 15-119-21295-00-00
Wiens 2-34
NW/4 Sec.34-33S-28W
Meade County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
Mark Cory